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BUSINESS CASE FOR {insert name of program here}

Revision History

Revision Number	Revision Date	Summary of Changes	Revision Page Number	Revised By

Approvals

Name of Executive Sponsor
Title of Executive Sponsor

Name of Executive Sponsor
Title of Executive Sponsor

Name of Executive Sponsor
Assistant City Manager

Name of Executive Sponsor
Title of Executive Sponsor

Distribution

Name *Title and name of Department*

Name *Title and name of Department*

Name *Title and name of Department*

Name *Title and name of Department*

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Note: Repeat this page for every project in the program. Then, delete these lines of instruction	8
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EXECUTIVE OVERVIEW

Introduction

- *Describes program background including primary business drivers, vision, goals, high-level requirements for new processes/focus*
- *Describes recommendation with summary of benefits to be derived*

PROGRAM CHARTER

Problem Statement

- *Provide a brief concise description of the business problem.*

Goals (High-Level Scope Statement)

- *Provide a short description of the high-level scope of the program*

Objectives

Provide a brief list of what the program is to accomplish. You should break out the short-term objectives from the long-term objectives here. These objectives should tie to the benefits/success factors.

Short-Term Objectives:

Long-Term Objectives:

Benefits/Success Factors

Provide the benefits/success factors and ensure that they tie back to the objectives. Use any of the following bulleted items to get started. Success factors should be precise and measurable.

Short-Term Success Factors:

Long-Term Success Factors:

High-Level Implementation Plan

Provide information about the expected projects/tasks to accomplish the goals, objectives and benefits/success factors of this program charter.

Project Number	Project Description	Expected Timeframe
1.		
2.		
3.		
4.		

Costs

- Documents best available Total Program by preparing an estimate of each planning and execution process for each project within the program. If on-going maintenance costs needs to be considered, they should be treated as a separate project and calculated separately. They could then be included in the overall program costs.

Planning and Execution Budgets for Project: _____

Planning Budget

Provide a list of activities and effort required to complete the planning process:

Activity #	Description	Elapsed Days	Work Hours	Estimated Cost	Milestone

Execution Budget

Complete the following table to provide an estimate of the effort and costs for completing the execution process for this project.

Activity #	Description	Elapsed Days	Work Hours	Estimated Cost	Milestone

Note: Repeat this page for every project in the program. Then, delete this line of instruction.

Provide a summary of the Planning Budget and the Execution budget.

Provide information about assumptions about the overall budget for this project.

[illegible]

Risks

Provide information on any known risks to the project overall.

Constraints

Provide information on any constraints that could impact the project.

Next Steps

- *Describes the series of activities/tasks following the signoff on the implementation.*

Appendices

Use this section to attach any supporting documentation to this Business Case.

Glossary

- Provide a glossary of terms that defines common terms used in this document or throughout the program.

Project Management Plan: Project Summary

State Organization: **Submitted by:**

Prime Contractor: **Date Awarded:**

Current Stage of Project:

Project is On Schedule:

Yes: ☐ **No:** ☐
Details:

Project is within Budget:

Yes: ☐ **No:** ☐
Comments:

Please answer the following questions by marking “Yes” or “No” and provide a brief response as appropriate

	Yes	No
Is this an updated Project Plan? If so, reason for Update: _____		
Budget for project by fiscal year and is project funded? If so, for what amount(s) and period(s):		
Budget Amount: Year: _____	_____	_____
Funded? _____	_____	_____
Budget Amount: Year: _____	_____	_____
Funded? _____		
Budget Amount: Year: _____		
Funded? _____		
Total Budget: _____		

Project Management Plan: Project Summary

Points of Contact

This should be the list of individuals that will be involved with the project during the execution phase.

Position	Name/Organization	Phone	E-mail
Project Manager			
Senior Management Sponsor			
Senior Technical Sponsor			
Procurement Contact			
Customers:			
Other Stakeholders (Top 3):			

Prime Contractor Information

Company:

Position	Name	Phone	E-mail
Project Manager			
Senior Technical Sponsor			
Contracts Contact			

Project Management Plan: Project Charter

Project:

Date:

Business Problem.

Statement of Work Goal / High-level Project Scope Statement

State Organization:

Release: 2.0

Project Management Plan: Project Charter

Project:

Date:

Project Objectives / Detailed Project Scope Statement

Provide a brief, concise list of what the project is to accomplish.

Short-Term

- 1.
- 2.
- 3.

Long-Term

- 1.
- 2.
- 3.

Success Factors:

List factors that will be used to determine the success of the project.

Short-Term

- 1.
- 2.
- 3.

Long-Term

- 1.
- 2.
- 3.

Project Dependencies/Constraints:

State Organization:

Release: 2.0

Project Management Plan: Project Tradeoff Matrix and Status Summary

Project:

Date:

Schedule	Scope	Resources

Identify variable to be CONSTRAINED, IMPROVED, ACCEPTED

Comments:

--

+/- Status

Team	Tech	Schedule	Cost	Comment
	-/+	-/+	-/+	
	-/+	-/+	-/+	
	-/+	-/+	-/+	
	-/+	-/+	-/+	
	-/+	-/+	-/+	

Discuss:

Legend

- + = Ahead of Schedule
- = Behind Schedule
- / = On Schedule

Project Management Plan: Project Organization

Project:

Date:

Provide an organization chart that defines the person reporting responsibility for the project organization.

Project:

Provide an activity list (work breakdown structure) that describes each task required by the project

[illegible]

Project:

[illegible]

Project Management Plan: Schedule

Project:

Date:

Provide the project schedule, using a Gantt chart. The schedule must include milestones, task dependencies, task duration, work product delivery dates, quality milestones (reviews/audits/inspections), configuration management milestones, and action items (with deadlines and responsibilities).

Project Management Plan: Estimated Cost At Completion

Project:

Date:

An assessment of the total effort and cost at completion of the project.

Analysis in Hours							Analysis in Dollars				
WBS No.	Activity Description	Budget Hours	Actual Hours	Est. to Complete	Est. @ Complete	Variance (+ = More)	Budget \$	Actual \$	Est. to Complete	Est. @ Complete	Variance (+ = More)

Project Management Plan: Resource Loading Profiles - Staffing Plan

Project:

Date:

Provide a staffing plan that shows the number of personnel, by type, that will be required on the project on a monthly basis. Your information should be based on a detailed FTE Resource Loading Table.

Project Management Plan: Project Requirements (Traceability Table) Product Scope Statement

Project:

Date:

Documents Product Specifications with appropriate cross-references to other documents, if applicable.

No.	Requirement	RFP Reference	SOW Reference	Task Reference	Specification Reference	Date Completed	Comments/Clarification
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							

SOW = Statement of Work

State Organization:

Release: 2.0

PM 02 - 10

Project Management Plan: Risk Management Worksheet

Project:

Date:

A description of project risks, the probability of the risk occurring, the impact of the risk on the project, and the suggested mitigation activities.

Last Risk Assessment Date:

Prepared by:

Ref #	Risk Category/ Event	Loss Hours	Probability	Risk Hours	Previous Risk Hours	Preventive Measures	Contingency Measures	Responsible Person	Comments

Project Management Plan: Configuration Management Plan

Project:

Date:

Provide a configuration management plan that defines the person responsible for project configuration management, the procedures that will be used, the planned configuration items, planned release dates for configuration items, and resources required to conduct CM.

CM Responsibility

Manager:

Additional Staff for CM:

Procedure Reference:

Configuration Items: Ensure that CM is implemented throughout the project's life cycle.

No.	Item	Comments
1.		
2.		
3.		

Ensure that project has a repository for storing configuration items and associated CM records. Briefly describe.

State Organization:

Release: 2.0

PM 02 - 12

Project Management Plan: Quality Plan

Project:

Date:

Provide a quality plan that defines the person responsible for project quality assurance, the procedures that will be used and resources required to conduct quality assurance.

QA Responsibility

Manager:

Additional Staff for QA:

Procedure Reference:

Planned Quality Event: Ensure that QA is implemented throughout the project's life cycle. Dates include QA audits, reviews and other project activities in which QA staff will participate.

No.	Item	Comments
1.		
2.		
3.		

Ensure that project has a repository for storing configuration items and associated QA records. Briefly describe.

Ensure that QA audits the baselines and CM activities on a regular basis. Briefly describe.

State Organization:

Release: 2.0

PM 02 - 13

Project Management Plan: Top Five Issues

Project:

Date:

A list of known issues associated with the project along with current status.

Ref #	Issue Description	Responsible Individual	Open Date	Closure Date	Status

Project Management Plan: Issue Status

Project:

Date:

Maintain a list of action items, including a description of the item, a point of contact a date by which action should be taken and a description of the action taken to close items.

Action Item #	Action Item Description	Responsible Individual	Open Date	Closure Date	Status

Project Management Plan: Approval

Project: _____

Date: _____

PROJECT MANAGEMENT PLAN TEMPLATE

Project Name: _____

Date: _____

Release #: _____

Project Manager: _____

Approvals:

Project Manager

**Prime Contractor Manager –
(if applicable)**

**State Organization Management/
Steering Committee Chairman**

User Management

Oversight Manager - (if applicable)

Project Sponsor

CIO - (if applicable)

The above signatures represent agreement with the attached plan including agreement with the activities, the risks, the effort and the cost of the associated project.

Project Estimate Summary Worksheet

WBS	Project Task	Labor Hour	Labor Rate	Labor Cost	Material Cost	Travel Cost	Other Cost	Total per Task
Other:								
Sub-Totals:								
Risk (Reserve)								
TOTAL (scheduled)								
Comments: <i>(List assumptions for costs as appropriate.)</i>								

Task Analysis Form

Project: _____

Date: _____

Task number: _____ Task name: _____

Predecessor task(s): _____ Prepared by: _____

Deliverables: _____

Milestones: _____

Normal mode

Resource	Units	Rate	Cost
Total			

Crash Mode

Resource	Units	Rate	Cost
Total			

Equipment/Supplies/Facilities: _____

Time estimate: _____ Must start: _____ Must finish: _____

Optimistic T_o : _____ Pessimistic T_p : _____ Most likely T_m : _____

Cost estimate: \$ _____

Notes:

Project Start-Up Check List

Project: _____

Date: _____

	Item	Status	Location	Comments/ Plan to Resolve
1	Planning			
1.1	Is the project statement -- scope, definition and objectives -- the same as agreed to in the Project Statement process			
1.2	Has the Project Statement been reviewed as part of the baseline process?			
1.3	Is there a baseline plan against which to measure progress?			
1.4	Does the baseline plan address or include the following areas:			
1.4.1	Project Scope, deliverables, and milestones			
1.4.2	Work Breakdown Structure with task dependencies			
1.4.3	Task plans, estimates, resource assignments			
1.4.4	Project Schedule with milestone dates			
1.4.5	Project progress tracking			
1.4.6	Issue Resolution and Change Management			
1.4.7	Quality Plan			
1.4.8	Risk Management Plan			
1.4.9	Project Organization			
	Other Plans as needed:			
1.4.10	Facilities Plan			
1.4.11	Documentation Plan			
1.4.12	Materials Plan			
1.4.13	Training Plan			
1.4.14	Back-up and Recovery Plan			
1.4.15	Contingency Plan			
1.4.16	Cut Over or Transition Plan			
1.4.17	Warranty Plan			
1.4.18	Others:			
1.5	Is the plan for project resources adequate?			
1.6	Are the original project schedule and budget realistic?			
1.7	Is the organization plan adequate?			
1.8	Are there adequate project controls?			
1.9	Is there an information system for the project?			
1.10	Were key project stakeholders brought into project plan?			
1.11	Were potential users involved early in the planning process?			
1.12	Was planning completed before the project was initiated?			
1.13	Is the plan under configuration management?			

Project Start-Up Check List

Project:

Date:

	Item	Status	Location	Comments/ Plan to Resolve
1.14	If there are vendors, have they signed off on the project plan?			
1.15	If there is an independent oversight contractor, have they signed off on the project plan?			
2	Organization			
2.1	Is the Project Manager qualified and experienced in Project Management?			
2.2	Have roles and responsibilities of the team been documented and clearly communicated to the team, customer, and stakeholders?			
2.3	Is the organization structure appropriate for the project's size and complexity?			
2.4	Is there an identified role of a technical leader (i.e., Project Lead, Team Lead, Solution Architect)?			
2.5	Is the quality audit function identified and assigned?			
2.6	Does the Project Manager have adequate administration and technical support?			
2.7	Is there a Change Control Manager?			
2.8	Have the configuration management functions been assigned?			
2.9	Are there backup strategies for key members of the project?			
2.10	Other Organization items:			
3	Tracking & Monitoring			
3.1	Are the various types of reports, their contents, frequency, and audience defined and communicated to the project team?			
3.2	Are the input requirements from the team members clearly documented and communicated?			
3.3	Have the reports to be produced, distributed, and filed been defined?			
3.4	Has the format for tracking and monitoring schedules and costs been defined?			
4	Reviewing			
4.1	Have the various meetings, the purpose, context, frequency, and participants been defined and communicated?			
4.2	Have the meeting materials been defined?			
4.3	Are the meetings set up to have assigned notes takers that will add action items/issues to the issue list?			
5	Issue Management			
5.1	Is an Issue Management Process documented?			
5.2	Is this process communicated to the customer and team members?			
5.3	Will an issue form be in use?			

Project Start-Up Check List

Project: _____

Date: _____

	Item	Status	Location	Comments/ Plan to Resolve
5.4	Will all project issues be unconditionally tracked through the issue resolution process?			
5.5	Will all tasks resulting from issues be entered into the project plan and tracked through the plan?			
5.6	Are there processes for unresolved issues to be escalated and resolved within a reasonable timeframe?			
6	Configuration Management (Change Control)			
6.1	Will there be a Change Control Process in place?			
6.2	Is the Change Control Process documented and on file?			
6.3	Has this process been communicated to the customer and project team?			
6.4	Will there be a change request form in use?			
6.5	Will all project deliverable and software configuration management be changed only through the change control process?			
6.6	Will all change requests be unconditionally tracked through this process?			
6.7	Will all change requests and current status be logged?			
6.8	Will all tasks resulting from approved changes be entered into the project plan and tracked through the plan?			
6.9	Will new change requests be acknowledged in a timely manner?			
6.10	Has a method and process for requirement tracking been developed?			
7	Risk Management			
7.1	Will the project risks being managed be according to the project's risk management process?			
7.2	Will the Risk Worksheet be updated on a regular and frequent basis?			
7.3	Will the Risk Status be reported to management on a regular and frequent basis?			
7.4	Will there be documented contingency plans for the top 5-10 risks?			
7.5	Will the Preventive Plans for the top 5 risks be identified, included in the project plan, and implemented?			
8	Quality Assurance			
8.1	Is there a Quality Assurance Plan documented?			
8.2	Are the quality assurance functions and related roles and responsibilities clearly defined?			
8.3	Are completion/verification criteria defined for each task producing an output?			

Project Start-Up Check List

Project:

Date:

	Item	Status	Location	Comments/ Plan to Resolve
8.4	Is there a process (test plans, inspections, reviews) defined for verifying outputs for each task?			
8.5	Will tasks be marked "complete" only after internal QA has been successfully completed?			
8.6	Will there be a formal process for submitting, logging, tracking, and reporting of items undergoing QA throughout the submit-test-rework-resubmit-retest cycle?			
8.7	Will statistics related to QA be collected and problems raised as issues?			
8.8	Will the QA related information be reported regularly as part of the Status Reporting mechanisms?			

Comments:

--

Status Report

Project: _____

Date: _____

Submitted by: _____

Project Organization Area: _____

Project is: ☐ On Plan ☐ Ahead of Plan ☐ Behind Plan

Reporting Period: From: ____/____/____ To: ____/____/____

Current Activity Status:

The description of activity should not span more than 2/3 lines. Activities should be linked to the project tasks list or WBS.

Significant Accomplishments:

Planned Activities for next period:

The description of each activity should not span more than 2/3 lines. Activities should be linked to WBS and WPI.

Status Report

Financial Status:

Planned Versus Actual Costs:

Planned Versus Actual Schedule:

Planned Versus Actual Staffing:

ETC Projection (Time):

EAC Projection (Cost):

Technical Status/Issues:

Major Action Items:

Current Risk Status:

Activity Tracking Table

Project:

Date:[illegible]

Change Control Form

Project: _____

Date: _____

Control Number: _____

Change Proposal Title: _____	Date Created: _____
Originator: _____	Organization: _____

Proposed Change Description and References:

Justification:

Impact of Not Implementing Proposed Change:

Alternatives:

Change Control Form

Project:

Date:

Initial Impact Analysis	
Baselines Affected: _____	
Configuration Items Affected:	

Cost / Schedule Impact Analysis Required?	No____ Yes____
Analysis Prepared by: _____	
Impact on Cost: _____	
Impact on Schedule: _____	
Impact on Resources: _____	
Final Review Results:	
Review Date: _____	
Classification:	____HIGH____MEDIUM____LOW

Review Results:	
Review Date: _____	Assigned to: _____
Organization: _____	
<input type="checkbox"/> Approve for Implementation	<input type="checkbox"/> Reject <input type="checkbox"/> Defer
Until: _____	
Reason:	
Signature of Responsible Person:	

Issue Resolution Form

Project: _____

Date: _____

Control Number _____

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Project Name: _____

Date: _____

Requester: _____ **Organization:** _____

Issue Type (check one)

☐ Request for Information

☐ System Problem

☐ Procedural Problem

☐ Other

(Specify) _____

Description:

Recommendation

Impact (if not resolved)

Date Resolution Needed: _____

Proposed Assignee: _____

Attachments (if any):

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Issue Resolution Form

Project: _____

Date: _____

Reviewer: _____ **Review Completion Date:** _____

Reviewer Comments:

Estimate of Additional Effort:

Cost / Schedule Impact Analysis Required? Yes___ No___

Resource Requirements	Work Days or Cost
_____	_____
_____	_____
_____	_____
_____	_____

Recommendation (check one)

___Accept ___Defer ___Need Additional Information ___Reject

Assigned to: _____ **Organization:** _____

Planned Completion Date: _____

Comments:

Project Manager Signature: _____ **Date:** _____

Actual Completion Date: _____ **Approval**

Signature: _____

Project Work Assignment

Project: _____ Date: _____

Assigned To:	_____	WA Ref No:	_____
Supervisor:	_____		
Functional Reference:	_____		
Technical Reference:	_____		
Planned Start Date:	_____		
Planned Completion Date:	_____		
Budget Hours:	_____		

Task Description:

Deliverable(s) Expected:

Attachments:

Relevant Standards: